Approved for use through 7/31/2006. OMB 0651-0032
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Ond	PATE	NT APPLICA	ATION	FEE DETER e for Form PTO	RECORD		ss it displays a valid OMB control number. Application or Docket Number.			
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL E	NTITY	OR	OTHEF SMALL	R THAN ENTITY
FOR NUMBER FI			R FILED	FILED NUMBER EXTRA		RATE	FEE		RATE	FEE
	C FEE FR 1.16(a))						s	OR		s
TOTA	L CLAIMS FR 1.16(c))		minus 20 = •			x \$=		OR	x \$=	
NDE	PENDENT CLAIMS	3	minus 3 = *			x \$=		ÓŘ	x \$=	
37 CFR 1.16(b)) minus 3 = 1							OR	1.6 -		
MULI	TIPLE DEPENDEN	T CLAIM PRESEN	1 (3/	CFR 1.10(0))		+ \$=			<u>+ \$</u> =	
If th	e difference in co	lumn 1 is less tha	n zero, ent	er "0" in column 2	!.	TOTAL		OR	TOTAL	L
	CL	AIMS AS AME	NDED -	- PART II					:	٠
	ı	(Column 1)		(Column 2)	(Column 3)	SMALL E	NTITY	OR		R THAN ENTITY
ار	1 1	CLAIMS		HIGHEST	PRESENT		ADDI-	l	RATE	ADDI-
AMENDMENT &	120/05/	REMAINING AFTER		NUMBER PREVIOUSLY	EXTRA	RATE	TIONAL FEE	1	IVAIL	TIONAL FEE
	Total	AMENDMENT	Minus	PAID FOR		\			x s=	
	(37 CFR 1.16(c)) Independent	. 2	Minus	··· 2	-	- X \$ _ · _ =	/	OR		-/
	(37 CFR 1.16(b))					X \$=	-/-	OR	X \$=	/
≤	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				R 1.16(d))	+ \$ = TOTAL	 	OR	+ \$= TOTAL	
						ADD'L FEE	_ ·	OR	ADD'L FEE	<u> </u>
		(Column 1)		(Column 2)	(Column 3)			-		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$=		OR	x s =	
	Independent (37 CFR 1,16(b))	•	Minus	***	=	x s =		OR	x s=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ =		OR	+s =		
	FIRST PRESENT	ATION OF MIDERIE	C DCI CIND			TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	x \$=		OR	x \$ =	
	(37 CFR 1.16(c)) Independent	•	Minus	•••	=		 	1	x s =	
	(37 CFR 1.16(b))				X \$=		OR			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$ = TOTAL	 	OR	+ s =	+	
		olumn 1 is less tha			4- MOR :	ADD'L FEE		OR	ADD'L FEE	<u> </u>

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.